



STATE OF MARYLAND
MARYLAND DEPARTMENT OF LABOR
PROFESSIONAL LICENSING BOARDS
MARYLAND BOARD OF ARCHITECTS
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Dloplboardofarchitects-dllr@maryland.gov

**DO NOT WRITE IN THIS SPACE
OFFICE RECORD**

RECEIVED CARD: _____
APPLICATION NO: _____
STAFF INITIALS: _____

**APPLICATION FOR ARCHITECTURAL REGISTRATION EXAMINATION (A.R.E.)
NO FEE REQUIRED**

CANDIDATES FOR EXAMINATION MUST BE ENROLLED IN AXP PRIOR TO FILING THIS APPLICATION. THE BOARD MEETS ON THE FOURTH WEDNESDAY OF EACH MONTH TO REVIEW APPLICATIONS. APPLICATION FILES WHICH ARE COMPLETE BY THE FRIDAY PRECEDING THE BOARD MEETING WILL BE REVIEWED AT THAT MONTH'S MEETING. NOTIFICATION OF THE BOARD'S DECISION WILL BE GIVEN BY LETTER AND EMAIL WITHIN SEVEN BUSINESS DAYS OF THE MEETING.

APPROVED APPLICANTS WILL RECEIVE FURTHER EXAMINATION INFORMATION FROM THE NCARB.

I. PERSONAL DATA

Name _____
Last Name on transcript if different

First Middle (If you do not have a middle name enter "N.M.N.")

Home Address _____
Street and Number

City County State ZIP Code

Residence Telephone No. _____ Business Telephone No. _____

Email Address:: _____

Date of Birth _____ Place of Birth _____
MONTH DAY YEAR City State Country

Social Security No. _____

If you do not have one, contact the Board's office.

Have you completed AXP: YES ☐ NO ☐

If yes, date completed _____ If not completed, enrollment date: _____

(NOTE: To qualify for early eligibility, you must be enrolled in AXP.)

II. CONDUCT QUESTIONS

1. Have you ever been convicted of a felony or misdemeanor in any State or Federal Court? YES ☐ NO ☐
If you answered "yes", please submit a letter giving a complete explanation of the circumstances along with a true test copy of the applicable court document(s).
2. Have you ever had this type of application denied by Maryland or any other jurisdiction? YES ☐ NO ☐
If you answered "yes", please submit a letter giving a complete explanation of the circumstances.

III. WORK EXPERIENCE DOCUMENTATION

INSTRUCTIONS

- (1) In order for the applicant to establish to the satisfaction of the Board that the applicant is a person of good moral character the applicant shall submit with this application, **three (3) LETTERS OF REFERENCE**. These letters should contain the following information:
 - Relationship to applicant.
 - Number of year's person has known applicant.
 - Whether or not the applicant is of good moral character.
 - Further comments and recommendations.
- (2) All first time candidates must be enrolled in the **Architectural Experience Program (AXP)** prior to filing this application. The completed application, including official sealed transcript(s), NCARB issued verification of enrollment in an AXP, three (3) letters of character reference, and if necessary, the appropriate ERC forms – Experience Record Certifications.
- (3) Applicants filing with a five (5) year NAAB accredited Bachelor of Architecture or a NAAB accredited Master of Architecture as a first professional degree **do not** have to complete the chart below.
- (4) Applicants filing with a four-year B.S. in Architecture degree; other degree; or no degree, i.e. experience alone, **must** complete the chart below showing the years of work experience that you are using to equate to education credits (see the Equivalency Matrix on page 4 of this application). Applicants must be enrolled in the AXP **before** applying. Work experience used for AXP cannot be used to fulfill the educational requirements.

List most current employment first and sequence back. Applicant shall secure and forward to the Board a separate ERC form (see attached) from each employer listed below.

Full Name and Complete Current Address of Employer Designate if the office was that of a registered architect (RA) If the office was other than that of a registered architect, state business.	Dates of Employment Give Month and Year	Total Time Employed		Indicate kinds of work engaged in for each employer and percentage of total time for each.										
		* Part Time	Full Time	Site Planning	Architectural Design	Working Drawings	Coordination of Structural Design	Coordination of Mech. or Elect.	Specification Writing	Cost Estimating	General Supervision	Administration	Client Contact	**Other Explain Below
	From	Years	Years											
	To	Months	Months											
	From	Years	Years											
	To	Months	Months											
	From	Years	Years											
	To	Months	Months											
	From	Years	Years											
	To	Months	Months											

* If part time work is noted, state average number of hours per week.

** If "other" kinds of work are noted, describe work.

IF NEEDED, ATTACH ADDITIONAL SHEETS

IV. EDUCATION

TRANSCRIPTS: Applicant shall furnish to the Board a complete official grade transcript (photocopies & "Issued to student" transcripts not acceptable) from the architectural college attended showing completion of required work and grades achieved, degree, and date of award. (The Board is interested in advanced degree, but transcripts leading to a bachelor's degree are most essential.)

SCHOOLS AND COLLEGES:

Colleges, Universities, Technical Schools attended	Dates of Attendance	Type of Degree Conferred/Date
<hr/>		
ADDRESS <hr/>		
<hr/>		
ADDRESS <hr/>		
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ADDRESS <hr/>		
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ADDRESS <hr/>		
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V. CERTIFICATION

"I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF." I further authorize the release of any information contained within this application to an authorized representative of the Department of Labor, Licensing and Regulation for further investigation.

Signature of Applicant _____ Date Signed _____

In accordance with Executive Order 01.01.1983-18, the Department of Labor, Licensing and Regulation is required to advise you as follows regarding the collecting of personal information: Personal information requested by the licensing agency of the Department is necessary in determining your eligibility for licensure. Such personal information is also intended for use as an additional means of verifying the licensee's identity or to enable the agency to communicate, in a timely manner, with the licensee should the need arise. The licensee has a right to inspect his/her personal record and to amend or correct the personal data if necessary. Personal information is generally available for inspection by the public only in accordance with the Public Information Act. Personal information is not routinely shared with state, federal or local government agencies.

EDUCATIONAL REQUIREMENTS

A. To qualify for a license, an applicant shall meet the educational requirements set forth in Business Occupations and Professions Article, §3-303(c), Annotated Code of Maryland.

B. If an applicant does not meet the professional education degree requirements referenced in §A of this regulation, an applicant shall comply with the education requirements by either work experience or academic training, or a combination of both, in accordance with the following Education Equivalency Matrix:

EDUCATION EQUIVALENCY MATRIX

For early exam eligibility, a candidate using the Education Equivalency Matrix should complete the education requirements before completing the Architectural Experience Program (AXP) requirements in Regulation .05 of this chapter.

TYPE OF DEGREE OR EDUCATIONAL EXPERIENCE (See Note 1)	WORK EXPERIENCE FOR EDUCATIONAL EQUIVALENCY (See Note 2)
FULL-TIME ACADEMIC TRAINING TOWARD A FIRST OR SECOND PROFESSIONAL ARCHITECTURAL DEGREE ACCREDITED AS FOLLOWS:	
Complete 1 academic year in NAAB professional program	8.5 years — separate from experience used for AXP
Complete 2 academic years in NAAB professional program	7 years — separate from experience used for AXP
Complete 3 academic years in NAAB professional program	5 years — separate from experience used for AXP
Complete 4 academic years in NAAB professional program	4 years — separate from experience used for AXP
BS OR BA IN ARCHITECTURE	4 years — separate from experience used for AXP
BS OR BA IN ENGINEERING, LANDSCAPE ARCHITECTURE OR INTERIOR DESIGN	5 years — separate from experience used for AXP
BS OR BA IN OTHER DISCIPLINE (including B.F.A.)	6 years — separate from experience used for AXP
AAS from community college (See Note 3)	10 years — separate from experience used for AXP
None	10 years — separate from experience used for AXP

1. Combinations of Educational Experience not explicitly stated in the Education Equivalency Matrix shall be considered on a case-by-case basis by the Board.

2. Work experience shall be directly related to architectural work and be completed under the direct supervision of a licensed architect. The work experience shall be full-time, a minimum of 40 hours per week. The work experience shall be completed in the office of a licensed Architect except that 80% of the required work experience may be completed as an employee of an organization other than the office of a licensed Architect if the work experience is directly related to architectural work and is completed under the direct supervision of a licensed Architect. All work experience must be documented on the Board's ERC Forms.

3. No credit is given.

FORM ERC
EXPERIENCE RECORD CERTIFICATION

The following information is required from each of the applicant's Employers. Use separate forms for each employer. Additional copies of this form should be made, as needed.

Applicant's Name _____

Date of employment (give month and year), from _____ to _____
 Check: FULL TIME ☐ or PART TIME ☐ (If part time, average number of hours per wk= _____)

FULL TIME employment shall be measured in forty (40) hour week. PART TIME employment, state average number of hours per week

KIND OF WORK	INDICATE PERCENTAGE OF TOTAL TIME FOR EACH KIND	KIND OF WORK	INDICATE PERCENTAGE OF TOTAL TIME FOR EACH KIND
Renderings		Full Size Details	
Tracing		Checking Shop Drawings	
Design		Observation of Construction	
Preliminary Sketches		Client Conferences	
Working Drawings		Structural Design	
Writing Specifications		Mechanical Design	
Large scale Details		Electrical Design	
TOTAL:		TOTAL:	

Types of Projects/Buildings on which work performed:

[illegible]

Outline other types of related work:

CERTIFICATION OF APPLICANT'S EXPERIENCE RECORD

APPLICANT'S NAME: _____

Does applicant possess adequate technical knowledge? If NO, explain.

Has applicant's experience been of satisfactory grade and character? If NO, explain.

What is applicant's reputation in the profession of architecture?

Other Comments: _____

Type or print name of architect under whose direction work was performed

Name _____

Firm _____

Address _____

City _____

Business Phone No. _____

Registration Number _____

State of Registration _____

Signature _____

Date _____

Imprint or stamp below Architect's seal
under whose direction work has been
performed.

